



## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE AMENDMENT TRANSMITTAL LETTER

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as first class mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on June 22, 2006.

**Applicant** 

: Prasanna Adhikari

Confirmation No. 9706

Application No. : 10/647,070

Filed

: August 22, 2003

Title

: SELF-HEALING TREE NETWORK

Grp./Div.

: 2155

Examiner

: Oanh L. Duong

Docket No.

: 57221/O231

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Post Office Box 7068 Pasadena, CA 91109-7068

June 22, 2006

## Commissioner:

Enclosed is an amendment to the above-identified application.

| CLAIMS AS AMENDED                |   |                               |                           |                      |                      |     |  |
|----------------------------------|---|-------------------------------|---------------------------|----------------------|----------------------|-----|--|
|                                  | Claims<br>Remaining<br>After<br>Amendment | Highest<br>Number<br>Paid For | Number<br>Extra<br>Claims | Small Entity<br>Rate | Large Entity<br>Rate | FEE |  |
| Total Claims Fee                 | 24  | *24                           | 0                         | 0 x \$25.00          | 0 x \$50.00          | 0   |  |
| Independent Claims               | 7   | ** 7                          | 0                         | 0 x \$100.00         | 0 x \$200.00         | 0   |  |
| Multiple Dependent<br>Claims *** |   |                               |                           | \$180.00             | \$360.00             | 0   |  |
| TOTAL FILING<br>FEE              |   |                               |                           |                      |                      | 0   |  |
| NO ADDITIONAL<br>FEE REQUIRED    | IF NO FEE R                               | EQUIRED,                      | INSERT "0'                |                      |                      | 0   |  |

LIST INDEPENDENT CLAIMS: 1, 16-18, 20, 21, and 23

- \* IF HIGHEST NUMBER PREVIOUSLY PAID FOR IS 20 OR LESS, WRITE "20" IN COLUMN 3
- \*\* IF HIGHEST NUMBER PREVIOUSLY PAID FOR IS 3 OR LESS, WRITE "3" IN COLUMN 3
- \*\*\* PAY THIS FEE ONLY WHEN MULTIPLE DEPENDENT CLAIMS ARE ADDED FOR THE FIRST

| Attached is our check for \$ to pay the fees calculated above.          |  |
|---|--|
| <br>A Petition for Extension of Time and the required fee are enclosed. |  |

The Commissioner is hereby authorized to charge any fees under 37 CFR 1.16 and 1.17 which may be required by or to give effect to this paper to Deposit Account No. 03-1728. Please show our docket number with any charge or credit to our Deposit Account. A copy of this letter is enclosed.

Other enclosures: IDS; Form PTO/SB/08A/B; (1) Reference; and Check (\$180)

Respectfully submitted,

CHRISTIE, PARKER & HALE, LLP

By

Jun-Young E. Jeon Reg. No. 43,693 626/795-9900

JEJ/sls

SLS PAS688168.1-\*-06/22/06 4:42 PM

Amendment Transmittal Letter Application No. 10/647,070